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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 89/670918	FILING DATE 9/29/00
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	1		1		1		51	
2				1		1	52	
3				1			53	
4				1			54	
5		4		4		2	55	
6		4		4		2	56	
7		4		4		2	57	
8		4		4		2	58	
9		4		4		2	59	
10		4		4		2	60	
11		4		4		2	61	
12		4		4		2	62	
13		4		4		2	63	
14		4		4		2	64	
15		4		4		2	65	
16		4		4		4	66	
17		2		2		2	67	
18		2		2		2	68	
19		2		2		2	69	
20		2		2		2	70	
21		3		3		3	71	
22				4		2	72	
23				4		2	73	
24				4		2	74	
25				4		2	75	
26				4		2	76	
27				4		2	77	
28				4		2	78	
29					1		79	
30					1		80	
31					1		81	
32					1		82	
33					1		83	
34					1		84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	1		1		7		TOTAL IND.	
TOTAL DEP.	62		40		50		TOTAL DEP.	
TOTAL CLAIMS	63		41		57		TOTAL CLAIMS	

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT of COMMERCE
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